

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                         | INITIALS | ID NO. | DATE    |
|----------------------------------|----------|--------|---------|
| <b>FEE DETERMINATION</b>         | J.L.     |        | 4/21/00 |
| <b>O.I.P.E. CLASSIFIER</b>       | J.       |        |         |
| <b>FORMALITY REVIEW</b>          |          | 62583  | 8-25-a  |
| <b>RESPONSE FORMALITY REVIEW</b> |          |        |         |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

| Claim    | Date     |
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| Final    |          |
| Original | 04/10/00 |
| 1        | 3/1/00   |
| 2        | 1/1/00   |
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| Claim    | Date              |
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| Final    |                   |
| Original |                   |
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| Claim    | Date |
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| Final    |      |
| Original |      |
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If more than 150 claims or 10 actions  
staple additional sheet here

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